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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Cor	nmittee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		Example: If typing, over the lines.	type 12FE4M5	
KATCHO FOR CO	NGRESS				I
ADDRESS (number and stree		PLAZA DR. #150			
▼ Check if different					
than previously reported. (ACC)	SACRAMENT	TO		CA	95833
2. FEC IDENTIFICATION	N NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00575886		3. IS THIS REPORT	x NEW (N)	OR AMENI	STATE ▼ DISTRICT  CA  24  1
4. TYPE OF REPORT  (a) Quarterly Reports:  April 15 Quart	,	(b) 12-Day <b>PR</b>	E-Election Report Primary (12P)	General (	
July 15 Quarte	erly Report (Q2)	Ш	Convention (12	C) Special (1	(2S)
	uarterly Report (Q3)	Election o	n M M /	D D / Y Y Y	in the State of
January 31 Ye	ear-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Repor	t for the:	
			General (30G)	Runoff (3)	OR) Special (30S)
Termination Re	eport (TER)	Election o	n M M /	D D / Y Y Y Y	in the State of
5. Covering Period	M M / D D D 01	7 Y Y Y Y 2016	through	M M / D D /	Y Y Y Y Y 2016
I certify that I have examine Type or Print Name of Trea	Bauer, David		knowledge and be	lief it is true, correct and	d complete.
Signature of Treasurer	Bauer, David, , ,		[Electronically File	ed] Date	/ D D / Y Y Y Y Y Y Y 2016
NOTE: Submission of false, e	erroneous, or incomple	ete information may	subject the person	n signing this Report to t	he penalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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Write or Type Committee Name KATCHO FOR CONGRESS

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D).....

2016 10 2016 11 80 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 828927.32 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 40405.15 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 788522.17 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 824268.28 (from Line 17) ..... (b) Total Offsets to Operating 23282.98 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 800985.30 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

#### For further information contact:

12473.13

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

### KATCHO FOR CONGRESS

Report Covering the Period: From: 10 01 2016 To: 11 08 2016

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	0.00	712793.79		
	(ii) Unitemized	0.00	72514.53		
	(iii) TOTAL of contributions from individuals	0.00	785308.32		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	43619.00		
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	828927.32		
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	41000.00		
	(b) All Other Loans	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	41000.00		
4.	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	23282.98		
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	893210.30		

**DETAILED SUMMARY PAGE** 

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	0.00	824268.28		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed	2500.07	20520 27		
	by the Candidate(b) Of All Other Loans	3526.87 0.00	28526.87		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	3526.87	28526.87		
20.	REFUNDS OF CONTRIBUTIONS TO:  (a) Individuals/Persons Other  Than Political Committees	0.00	40405.15		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	40405.15		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	3526.87	893200.30		
	III. CASH SU	JMMARY			
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	3526.87		
24	TOTAL RECEIPTS THIS PERIOD (from Line	0.00			
25.	SUBTOTAL (add Line 23 and Line 24)		3526.87		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	3526.87		
27	CASH ON HAND AT CLOSE OF REPORTIN	0.00			

## SCHEDULE B (FEC Form 3)

	FOR LINE	NUMBE	R:		PAGE	5	OF	7
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page		17		18	×	19a		19b
Detailed Garrinary rage		20a		20b		20c		21
y not be sold or used by any person for the purpose of soliciting contributions idress of any political committee to solicit contributions from such committee.								

TEMIZED DISBURSEMENTS	Detailed Summary Page	17   18   <b>X</b> 19a   19b   20a   20b   20c   21						
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and								
NAME OF COMMITTEE (In Full) KATCHO FOR CONGRESS	,,							
Full Name (Last, First, Middle Initial)  A. ACHADJIAN, KHATCHIK, , ,  Mailing Address 222 GRAND AVE.	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City State ARROYO GRANDE CA Purpose of Disbursement  Candidate Name	Zip Code 93420 Category/	FEC Identification Number  C  Amount of Each Disbursement this Period						
KHATCHIK ACHADJIAN, , , ,  Office Sought:	Type	3526.87  Transaction ID : PAYB2849  Memo Item						
Full Name (Last, First, Middle Initial)  3.  Mailing Address	Date of Disbursement							
City  Purpose of Disbursement  Candidate Name  Office Sought:  House Senate Primary Other (	Zip Code  Category/ Type  General	FEC Identification Number  C  Amount of Each Disbursement this Period  Memo Item						
State: District: Full Name (Last, First, Middle Initial)  C.  Mailing Address		Date of Disbursement						
City  Purpose of Disbursement  Candidate Name  Office Sought: House Disbursement For Senate Primary Other (	FEC Identification Number  C  Amount of Each Disbursement this Period  Memo Item							
State: District:  SUBTOTAL of Disbursements This Page (optional)								
TOTAL This Period (last page this line number only)		3526.87						

# SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 6 OF
FOR LINE NUMBER: (check only one)

13a **x** 13b

						<b>A</b> 100			
	ME OF COMMITTEE (In Full) ATCHO FOR CONGRESS	3			Transa	ction ID : PAYC159			
	•	OAN SOURCE Full Name (Last, First, Middle Initial)  ACHADJIAN, KHATCHIK, , ,  Mailing Address							
	222 GŘAND AVE.		Other (specify)						
City ARROYO GRANDE			State ZIP Code CA 93420			Personal Funds of the Candidate			
			_		Outstanding at Olega of This Posical				
	Original Amount of Loan	0.00	Cumulative Pay	ment io	17526.87 12473.13				
	TERMS Date Incurred		,	ate Due	Interest Rat	e Secured:			
	<sup>M</sup> 06 <sup>M</sup> / □30 □ / Y Ž01Š	Y	M M / D D	/ Y06	(If none, ente	.00			
	List All Endorsers or Guarantors	(if any) to	o Loan Source			<u> </u>			
	1. Full Name (Last, First, Middle I	• • • •			Name of Employer				
	Mailing Address				Occupation				
					Amount Guaranteed				
	City	State	ZIP Code			7 - 7			
	2. Full Name (Last, First, Middle In	itial)	'		Name of Employer  Occupation				
	Mailing Address								
	O'th .				Amount Guaranteed				
	City	State	ZIP Code			9 9			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
			ZID Code		Amount Guaranteed				
	City	State	ZIP Code		Outstanding:	9			
	4. Full Name (Last, First, Middle In	itial)		Name of Employer					
	Mailing Address			Occupation					
	City State ZIP Code			Amount Guaranteed					
	City	State	ZIP Code		Outstanding:	9 9			
SI	<b>UBTOTALS</b> This Period This Page (	ontional)				10.770.10			
						12473.13			
T	OTALS This Period (last page in this	s line only	/)		•	12473.13			
c	earry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry for	ward to appropriate line of Summary.			

### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: PAYC159

LOAN OF PERSONAL FUNDS

Form/Schedule: Transaction ID: